

be made for each, and ... number of each
a SEPARATE REPORT, in order of birth stated.
in case of more than one child

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS

STANDARD CERTIFICATE OF BIRTH

State File No. 131

Registered No. 802

1. PLACE OF BIRTH

County Gila

State Arizona

District or Township

or Village

City Miami

No. 15 Fred Street

St.

Ward

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Encarnacion Hansen

If child is not yet named, make supplemental report, as directed.

3. Sex of Child

To be answered ONLY
in event of plural
births.

4. Twin, triplet or other

6. Legitimate?

7. Date

of birth

Month

Day

Year

Boy

yes

5. No., in order of birth

yes

July 8 1928

8.

FATHER

Full name

Encarnacion Hansen

14.

MOTHER

Full maiden name

Belen Sedan

9. Residence

(Usual place of abode)

15 Fred Street

If non-resident, give place and state.

15. Residence

(Usual place of abode)

15 Fred St

If non-resident, give place and state.

10. Color or race

Mexican

11. Age at last birthday 25 (Years)

16. Color or race

Mexican

17. Age at last birthday 20 (Years)

12. Birthplace (city or place)

(State or country)

Sombriete

Zacatecas Mexico

18. Birthplace (city or place)

(State or country)

Sombriete

Zacatecas Mexico

13. Occupation

Nature of industry

Miner

19. Occupation

Nature of industry

Housewife

20. Number of children of this mother

(Taken as of time of birth of child herein certified and including this child).

(a) Born alive and now living

(b) Born alive but now dead

(c) Stillborn

21. Were precautions taken against ophthalmia neonatorum.

yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was

(Born alive or stillborn)

alive

at 11:15 A.m. on the date above stated.

Signature

Rosa Cortez

(Physician or midwife)

* When there was no attending physician or midwife, then the father, householder, etc. should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Given name added from a supplemental report

Month, day, year

Address

806 Sullivan St

Filed

July 12, 1928

L. E. Trim

Registrar.

Registrar.

575-708-225